



MISSOURI DEPARTMENT OF NATURAL RESOURCES

MISSOURI'S DRYCLEANING ENVIRONMENTAL RESPONSE TRUST (DERT) FUND APPLICATION

As soon as you have a known or suspected release from an active or abandoned dry cleaning facility, please fill out this application form as completely as you can. Please print or type the form.

I. FACILITY INFORMATION

FACILITY NAME OR ABANDONED SITE NAME		PLANT NO.		COUNTY	
SITE ADDRESS		CITY		STATE	ZIP CODE
FACILITY MAILING ADDRESS (IF DIFFERENT FROM ABOVE)		CITY		STATE	ZIP CODE
TOTAL YEARS OF OPERATION AS A DRY CLEANER		US CONGRESSIONAL DISTRICT	MO SENATE DISTRICT		MO HOUSE DISTRICT
LATITUDE (DECIMAL DEGREES)	LONGITUDE (DECIMAL DEGREES)	SOURCE OF LATITUDE/LONGITUDE DATA		TOWNSHIP, RANGE, SECTION	
FACILITY CONTACT PERSON	TITLE	FACILITY PHONE NUMBER		FACILITY FAX NUMBER	

II. PROPERTY OWNER INFORMATION

NAME	
ADDRESS, CITY, STATE, ZIP CODE	
PHONE NUMBER	FAX NUMBER

III. DERT FUND APPLICANT

NAME		
ADDRESS, CITY, STATE, ZIP CODE		
PHONE NUMBER	FAX NUMBER	E-MAIL

RELATIONSHIP TO PROPERTY

- ☐ OWNER OF PROPERTY ☐ PROSPECTIVE PURCHASER ☐ OTHER _____
- ☐ OWNER OR OPERATOR OF DRY CLEANING FACILITY

IV. FACILITY QUESTIONS

1. IS THIS FACILITY BEING USED AS AN ACTIVE DRY CLEANING FACILITY THAT USES DRY CLEANING SOLVENTS ON SITE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE LIST YEARS OF OPERATION:
2. PLEASE LIST THE DRY CLEANING SOLVENTS THAT ARE USED AT THIS FACILITY CURRENTLY AND THOSE USED IN THE PAST.
3. PLEASE LIST THE TYPE AND NUMBER OF DRY CLEANING MACHINES PRESENT AT THIS FACILITY

IV. FACILITY QUESTIONS (CONTINUED)

4. ARE THERE ANY OTHER MACHINES/EQUIPMENT/UNDERGROUND STORAGE TANKS, BESIDES THE DRY CLEANING MACHINES THAT STORE DRY CLEANING SOLVENT, LOCATED AT THIS FACILITY THAT CONTAINED DRY CLEANING SOLVENTS NOW OR IN THE PAST?

☐ YES ☐ NO IF YES, PLEASE LIST:

V. INFORMATION ABOUT THE RELEASE

1. WHEN DID YOU FIRST LEARN A RELEASE OF DRY CLEANING SOLVENTS HAD OCCURRED?

2. WHAT WAS THE CAUSE OF THE RELEASE? (I.E. ACCIDENTAL SPILL, LEAK, SOIL OR GROUNDWATER TESTING, ETC.)

3. MDNR SPILL NUMBER (OBTAINED BY CALLING THE DEPARTMENT'S EMERGENCY SPILL LINE AT 573-634-2436.)

4. HAS THE SOURCE OF THE CONTAMINATION BEEN IDENTIFIED? (I.E. THE DRY CLEANING MACHINE, SPILL, UNDERGROUND STORAGE TANKS, DRUMS, ETC.)

5. IS THERE ANY EVIDENCE THAT THE CONTAMINATION HAS MIGRATED BEYOND THE BOUNDARIES OF THE PROPERTY?

☐ YES ☐ NO

VI. ASSESSMENT AND CLEANUP STATUS

HAVE ANY ENVIRONMENTAL SITE ASSESSMENTS, AUDITS, SAMPLE COLLECTIONS OR ANALYSES BEEN PERFORMED AT THE SITE?

☐ YES ☐ NO

IF YES, PLEASE INDICATE BELOW WHAT SITE ASSESSMENTS HAVE BEEN PERFORMED.

☐ PHASE I ☐ PHASE II ☐ OTHER _____

HAZARDOUS SUBSTANCES HAVE BEEN DETECTED IN

☐ SOIL ☐ GROUNDWATER ☐ NOT DETECTED ☐ NOT SAMPLED ☐ OTHER _____

HAS A REMEDIAL ACTION PLAN BEEN DEVELOPED?

☐ YES ☐ NO

HAS IMPLEMENTATION OF THE PLAN BEGUN?

☐ YES ☐ NO ☐ DOES NOT APPLY

IF THE SITE IS NOW OR HAS EVER BEEN LISTED ON CERCLIS, INDICATE EPA CERCLIS IDENTIFICATION NUMBER

IS THE SITE LISTED ON THE EPA'S NATIONAL PRIORITIES LIST (NPL)?

☐ YES ☐ NO

OTHER IDENTIFICATION NUMBERS (I.E. EPA RESOURCE CONSERVATION AND RECOVERY ACT (RCRA) ID NUMBER, PETROLEUM STORAGE TANK REGISTRATION NUMBER, ETC.)

IS OR WAS THE SITE, OR ANY PART THEREOF, THE SUBJECT OF AN ENFORCEMENT ACTION, OR DOES THE SITE WARRANT AN ENFORCEMENT ACTION UNDER RCRA; COMPREHENSIVE ENVIRONMENTAL RESPONSE COMPENSATION AND LIABILITY ACT (CERCLA); THE MISSOURI HAZARDOUS WASTE MANAGEMENT LAW, OR ANY OTHER FEDERAL OR STATE ENVIRONMENTAL LAW OR STATUTE?

☐ YES ☐ NO ☐ IF YES, PLEASE LIST _____

VII. REQUIRED DOCUMENTATION AND ENCLOSURES

Please enclose the following with this application:

Site Map – a current U.S. Geological Survey 7.5 minute Quadrangle Map, and longitude and latitude coordinates. High quality color copies are acceptable. Street maps are preferred for urban areas.

A narrative statement describing the history of operations at the site, including dates and nature of activities that may have caused the contamination, and the estimated volume(s) and source(s) of the contamination.

Copies of all existing and relevant site assessment reports. A phase I report should be submitted with your application as a minimum. Please submit any photographs as originals or high-resolution copies.

A remedial action plan, if one has been prepared.

Please complete this application, sign in the appropriate space on page 3, and return, along with the above required documentation to:

Attn: Drycleaning Environmental Response Trust (DERT) Fund
Missouri Department of Natural Resources
Brownfields/Voluntary Cleanup Section
P.O. Box 176
Jefferson City, MO 65102-0176

If you have any questions, please contact the DERT Fund at (573) 526-8913.

VIII. INTENTION TO PARTICIPATE

The undersigned requests that the Missouri Department of Natural Resources provide oversight of investigation and cleanup of possible contamination at the property described above in accordance with Section 260.900 to 260.960 RSMo and 10 CSR 25-17.010 to 10 CSR 25-17.170.

The undersigned applicant certifies that he or she declares to the best of his or her knowledge and belief that the information herein is true, complete, correct and accurate and furthermore certifies that he or she is fully authorized to request participation in the DERT Fund.

Acceptance of the site into the DERT Fund does not mean nor imply that the department has made a final determination regarding whether the site requires or warrants action under the Comprehensive Environmental Response Compensation and Liability Act (CERCLA), the Resource Conservation and Recovery Act (RCRA), the Missouri Hazardous Waste Management Law, or any other federal or state environmental law or statute. Acceptance into the DERT Fund is based solely on information related to the site that is known to the department at the time the application is submitted. The department reserves the right to exercise its authority under the referenced statutes should information in addition to that known to the department at the time the application is submitted becomes available which demonstrates that action under one or more of the referenced statutes is warranted, or should conditions at the site change resulting in a situation that warrants action under the referenced statutes.

APPLICANT'S SIGNATURE

DATE

AUTHORIZED AGENT'S SIGNATURE (ADDRESS, RELATIONSHIP TO APPLICANT)

DATE

IX. FOR DEPARTMENT USE ONLY

DATE APPLICATION RECEIVED	POSTMARK DATE
DATE REVIEWED	REVIEWED BY
DATE APPROVED	APPROVED BY
TRACKING NUMBER ASSIGNED	DATE LOGGED IN COMPUTER

[illegible]